**ANNEX C**

REPUBLIC OF THE PHILIPPINES

City of Manila

DEED OF ASSIGNMENT

WITH SPECIAL POWER OF ATTORNEY

I, \_\_\_\_\_\_\_\_\_\_\_of legal age, President of Name of HMO., with business name address at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_after having duly been sworn to in accordance with law, do hereby depose and say”

1. I am the duly authorized representative of Name of HMO. as evidenced by a copy of The Secretary’s Certificate of the Board Resolution authorizing me as such, and is hereby attached hereto as Annex “A”;
2. The Company hereby assigns and transfers into the Insurance Commission, Manila, as a Deposit and security for the benefit of its enrolled members the following government securities in the amount of (in words) ₱ (in figures);

ISIN DUE DATE FACE AMOUNT

PIBL\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ ₱ \_\_\_\_\_\_\_\_\_\_\_\_\_

1. The Company shall reinvest within five (5) days the proceeds of the maturing securities mentioned in the preceding paragraph in the form of long-term government securities, in accordance with Circular Letter No.\_\_\_\_\_\_. Otherwise, the Insurance Commissioner is hereby appointed to be our Attorney-in-Fact, with full power of substitution to monitor and transact the reinvestment of such proceeds for and on behalf of the Company, in such securities to be placed in the name of the Company, pursuant to and subject to the terms of Circular Letter No. 2019-74 to all rights and interest of the Company over such securities in the books of the Bangko Sentral ng Pilipinas as may be warranted in accordance with law.
2. The Company shall submit the original and certified true copies of the proofs of investments made, to the Insurance Commission, within five (5) days after redemption of the matured securities;
3. Said replacement shall be lodged under the New Registry of Scripless Securities with the Bureau of the Treasury;
4. THE COMPANY UNDERSTANDS THAT NON-COMPLIANCE WITH ANY OF THE PROVISIONS IN THIS DEED OF ASSIGNMENT SHALL BE GROUNDS FOR THE IMMEDIATE SUSPENSION OR REVOCATION OF ITS CERTIFICATE OF AUTHORITY IN ACCORDANCE WITH THE PERTINENT PROVISIONS OF CIRCULAR LETTER NO. \_\_\_\_\_\_\_.

IN WITNESS WHEREOF, I have hereunto set my hand this \_\_\_\_day of \_\_\_\_\_, 20\_\_\_\_.

**FOR: Name of HMO**

Signature

**Name of the President**

SUBSCRIBED AND SWORN TO BEFORE ME, THIS\_\_\_\_DAY OF \_\_\_\_\_,20\_\_\_\_, affiant having exhibited before me his Community Tax Certificate No.\_\_\_\_\_\_\_\_\_\_\_, issued at on\_\_\_\_\_\_\_\_\_\_\_\_\_.

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